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NAME OF COMMITTEE (in full)	USE FEC MAILING LABEL OR TYPE OR PRINT	Example:If typing, typover the lines	pe	
New York Senate 2010				
ADDRESS (number and street) Check if different than previously	120 Maryland Ave NE	<u> </u>		20002
reported. (ACĆ)	CIT	<u> </u>	STATE	ZIP CODE
FEC IDENTIFICATION NUMBER CO0476622	BER 3. IS TH	IX:IA⊏AA' US	AMENDED (A)	4 STATE DISTRICT
TYPE OF REPORT (Choose One)	(b) Monthly Feb 20 (l	M2) : May 20 (M5) Aug	20 (M8) Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	Due On: Mar 20 (I	M3) Jun 20 (f	vl6) Sep	20 (M9) Dec 20 (M12)
April 15 X: Quarterly Report (Q1)	Apr 20 (1		17) and/or Oct	20 (M10) Jan 31 (YE) and/or Semi-annual Repor
July 15 Quarterly Report (Q2) and/or Semi-annual Report	rt (c) 12-Day . PRE-Election	, Primary (12P)	eneral (12G) Run	n off (12R) This report also covers
October 15 Quarterly Report (Q3) January 31	Report for the:	The second secon	in the State of	the semi-annual period See Line 6(b)
July 31 Mid-Year Report (Non-election Year - PAC/Party) (MY) and/or Semi-annual Report	POST-Election Report for the:	General (30G)	Runoff (30R) Spe in the State of	This report also covers the semi-annual period See Line 6(b)
Covering Period(s)	(a) Quarterly/Monthly/Pre-	-/Post-Election Covered	Period	(b) Semi-annual Covered Peri
02	22 2010	through 03	31 2010	and/or January 1 - June 30 July 1 - December 31
Total Reportable Bundled Contri Lobbyists/Registrants or Lobbyis	- · · · · · · · · · · · · · · · · · · ·	riy/Monthly/Pre-/Post-Ele	ection Covered Period	(b) Semi-annual Covered Period
I certify that I have examined this	Report and to the best of my k	nowledge and belief it is	true, correct and comp	lete.
Type or Print Name of Treasurer Signature of Treasurer	Ciliampher Kooo		Date 0.4	15; 2010
NOTE: Submission of false, erron	neous, or incomplete information	on may subject the perso	in signing this Report to	the penalties of 2 U.S.C. §437a.
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